
STATE OF CONNECTICUT
OFFICE OF THE HEALTHCARE ADVOCATE
STATE INNOVATION MODEL PROGRAM MANAGEMENT OFFICE

REQUEST FOR PROPOSALS (RFP) FOR ADVANCED MEDICAL HOME PRACTICE TRANSFORMATION SERVICES

FIRST Addendum

Release Date: 08/15/2016

Official Contact

The SIM PMO has designated the individual below as the Official Contact for the purposes of this RFP. All communications with the Official Contact must be in writing.

The Official Contact is the only authorized contact for this procurement and, as such, handles all related communications on behalf of the PMO. Respondents, Prospective Respondents, and other interested parties are advised that any communication with the following about this RFP is strictly prohibited:

1. any other PMO employee(s),
2. personnel of our state agency partners directly engaged in SIM related activities, and
3. personnel under contract with the PMO or our state agency partners who are participants in the SIM CORE team.

Respondents or Prospective Respondents who violate this instruction risk disqualification from further consideration. If you are uncertain as to whether communication is permitted with an individual or entity, please submit your question to the Official Contact.

Name: Shiu-Yu Schiller
Address: P.O. Box 1543
Hartford, CT 06144
E-Mail: Shiu-Yu.Schiller@ct.gov